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SOUTHFIELD,	MI 48075		М	yron J. Lløyd	/	(Depositor's name)	
				114 2/320 /3/13/0-		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/722,999	,999 11/24/2003		Brian Freeman	203.001PT		9560	
TILE OF INVENTION				DDELY DATE HOUSE EEE	TOTAL FEE(S) DUE	DATE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	\$1000	03/13/2007	
nonprovisional	YES	\$700	\$300	\$0 1	\$1000	03/13/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
REDMAN, JERRY E 3634			049-334000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attorney or a constant of the constant o	Proprinting on the patent front page, list  1) the names of up to 3 registered patent attorneys ragents OR, alternatively,  2) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is sted, no name will be printed.  1 BROOKS KUSHMAN P.C.  2			
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Please check the appropr	iate assignee category o	r categories (will not be p	rinted on the patent):	Individual Corporat	ion or other private grou	up entity Government	
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